

FOR INSTRUCTIONS, SEE BACK OF FORM
DISCLOSURE SUMMARY PAGE

File with:
 Iowa Ethics and Campaign
 Disclosure Board
 510 E. 12th, Ste. 1A
 Des Moines, Iowa 50319
 Fax: 515-281-4073

Effective January 1, 2010, all statements and reports filed by new committees for state office must be filed electronically and effective January 1, 2012, statements and reports filed by all committees for state office must be filed electronically.
 Effective May 1, 2010, all statements and reports for State PACs and State Parties must be filed electronically.

IA ETHICS AND
 CAMPAIGN DISCLOSURE

2010 JUL 19 PM 12:31

COMMITTEE NAME (Must be same as on Statement of Organization)

Citizens for Lane Williams

IMPORTANT: Indicate by # type of committee you are reporting for:

(1) Statewide/Legislative/Judge Standing for Retention Candidate (2) State PAC (3) State Party
 (4) County Central Committee (5) County Candidate (6) City Candidate (7) School Board or Other Political Subdivision Candidate (8) County PAC (9) City PAC (10) School Board or Other Political Subdivision PAC (11) Local Ballot Issue

CANDIDATE COMMITTEES ONLY:

Candidate Name

Nate Williams

Political Party (if applicable)

Democrat

Office Sought

House

District (if Senate or House)

29

FORM DR-2 (Rev. 12/2009)	DISCLOSURE REPORT
For Office Use Only	
Comm. #	<u>1753</u>
Logged In	<u>MMW</u>
Scanned	
Computer	
Audited	

Late reports are subject to possible civil and criminal penalties. Pursuant to Iowa Code sections 68B.32A(7) and 68A.401(3), the candidate, for a candidate's committee, and the chairperson, for any other type of committee, is the individual responsible for filing timely and accurate reports.

MMW
 SIGNATURE OF PERSON FILING REPORT

319 995-8921
 TELEPHONE

7.17.10
 DATE SIGNED

I AM FILING A 7-17-10 REPORT FOR (1) ELECTION / (2) NON-ELECTION YEAR.
 (report date) Indicate by # ☐

☐ CHECK IF AMENDMENT TO REPORT DATED _____

☐ Check if this is final (termination) report and attach Notice of Dissolution Form DR-3.
 (You must continue to file reports until a DR-3 is filed.)

Local Committees, enter Date of Election
County & Local Committees, enter County in which Election is held

STATEMENT OF CASH ON HAND

CASH ON HAND at the beginning of the reporting period. (Total of all funds held by the committee. This amount MUST be the same as the cash on hand at the end of the last reporting period or must be zero if this is first report filed.)

\$ 20,633.22

ADD TOTAL MONEY TAKEN IN THIS PERIOD

Schedule A: Cash Contributions total (Attach Schedule A) (*also see in-kind below)

13,955

Schedule F: Loans Received total (Attach Schedule F)

Schedule H: Total Sales of Campaign Property (Attach Schedule H)

(Schedule H applies to Candidates' Committees Only)

SUB-TOTAL \$ 34,588.22

SUBTRACT TOTAL MONEY SPENT THIS PERIOD

Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below)

3,917.98

Schedule F: Loan Repayments total (Attach Schedule F)

CASH ON HAND at the end of this reporting period (If final report balance must be zero) \$ 30,670.24

**UNPAID BILLS (From Schedule D - Attach Schedule D) \$

*IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E) \$ 50

**OUTSTANDING LOANS (From Schedule F - Attach Schedule F) \$ 700

CONSULTANT BREAKDOWN (Schedule G Attached?)

YES ☒ NO

CANDIDATE COMMITTEES ONLY:

VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H) \$

STATE COMMITTEES: Submit a reconciled campaign account bank statement in January of each year.

For Instructions, See Back of Form

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

COMMITTEE NAME (Must be same as on Statement of Organization)

Citizens For Miller

SCHEDULE

A

(Rev. 07/03)

MONETARY
RECEIPTS☐ CHECK THIS BOX IF
AMENDING FORM

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

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DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND-RAISER INCOME
6.22.10	ID# CK# 1370	JONATHAN W. BYERS 2436 SHERIDAN ST. HOUSTON, TX. 77030		\$ 200.-	<input type="checkbox"/>
6.22	ID# CK# ACT Blue	ERICA WALTERS 119 COLLINGWOOD ST SAN FRANCISCO, CA 94114		250.-	<input type="checkbox"/>
6.22	ID# CK# ACT Blue	ELANA LIPSEY 3173 18th ST. N.W. WASHINGTON DC, 20012		50.-	<input type="checkbox"/>
6.22	ID# CK# ACT Blue	BRIDGET TRINOR 534 W Evelyn ST Freeport, IL 61032		50.-	<input type="checkbox"/>
6.22.10	ID# CK# ACT Blue	JOHN HORGAN 601 W 57th ST NEW YORK, NY 10017		100.-	<input type="checkbox"/>
6.23.10	ID# 300654 CK# WI. 1358	U.E. LOCAL 1111 939 S. 2nd St. MILWAUKEE, WI 53204		200.-	<input type="checkbox"/>
6.23.10	ID# CK# 21719	THOMAS ALLER 1089 CEDAR WOODS AVE. CEDAR RAPIDS, IA 52403		400.-	<input checked="" type="checkbox"/>
6.23	ID# CK# 6096	MANUFACTURED HOUSING 1400 DEAN AVE DES MOINES, IA 50316		250.-	<input checked="" type="checkbox"/>
6.23	ID# CK# 6058	IA. CHIROPRACTIC SOCIETY 100 W GRAND AVE. #240 DES MOINES, 50309		100.-	<input checked="" type="checkbox"/>
6.23	ID# CK# 4694	TIMOTHY SAMELRETH 3604 HONEY HILL DR CEDAR RAPIDS, IA 52403		400.-	<input checked="" type="checkbox"/>
SUB-TOTAL				\$ 2,000.-	
TOTAL (if last page of this schedule)				\$	

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Page 1 of 7
(for Schedule A)

For Instructions, See Back of Form

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

COMMITTEE NAME (Must be same as on Statement of Organization)

Citizens Law Alliance

SCHEDULE

A

(Rev. 07/03)

MONETARY
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6.29.10	ID# 6021 CK# 002538	CUPAC PO Box 10409 Des Moines, IA 50306		\$ 1,000.-	<input checked="" type="checkbox"/>
6.29	ID# CK# 6091	LARRY BARTLETT 2688 Hidden Valley TR. Solon, IA 52333		300.-	<input checked="" type="checkbox"/>
6.29	ID# CK# 6512	RODNEY SULLIVAN 2326 E COURT IOWA CITY, IA 52245		200.-	<input checked="" type="checkbox"/>
6.29.10	ID# CK# 3977	IOWA LAW PAC 625 E COURT Des Moines, IA 50309		100.-	<input checked="" type="checkbox"/>
7.1.10	ID# CK# 1079	LAARL DILLARD 405 S. 3rd St. MT. VERNON, IA 52814		200.-	<input checked="" type="checkbox"/>
7.1.10	ID# CK# 9206	CATHARINE BLANDS 389 Green Valley TR. Cedar Rapids, IA 52403		200.-	<input checked="" type="checkbox"/>
7.1.10	ID# CK# 9310	LYNNE HIMMELREICH 1013 400th ST Oxford, IA 52322		200.-	<input checked="" type="checkbox"/>
7.1.10	ID# CK# 9103	Elizabeth Slappy 190 Cottage Grove Ave #112 Cedar Rapids, IA 52403		100.-	<input checked="" type="checkbox"/>
7.1.10	ID# CK# 6519	Wm. Nicholson 365 LINDSAY LN Cedar Rapids, IA 52403		400.-	<input checked="" type="checkbox"/>
7.1.9	ID# CK# 9182	JAY WILLEMS 401 E 5th ST. AMES, IA 52205	Nathan	500.-	<input checked="" type="checkbox"/>
SUB-TOTAL				\$3200.-	
TOTAL (if last page of this schedule)				\$	

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Page 4 of 4
(for Schedule A)

For Instructions, See Back of Form

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

COMMITTEE NAME (Must be same as on Statement of Organization)

Citizens For Williams

SCHEDULE A (Rev. 07/03)	MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

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7.9.10	ID# CK# 4605	Linda Jordan 817 3rd St MT. VERNON, IA 52314		\$ 200.-	<input checked="" type="checkbox"/>
7.9	ID# CK# 12217	Sue Olson 4019 Windham Woods Ct. Cedar Rapids, IA 52403		200.-	<input checked="" type="checkbox"/>
7.9	ID# CK# 6042	Paul Darter 1664 Camelback Rd. SOLON, IA 52333		200.-	<input checked="" type="checkbox"/>
7.9	ID# CK# 4475	KAY HALLORAN 825 17th ST SE CEDAR RAPIDS, IA 52408		200.-	<input checked="" type="checkbox"/>
7.9	ID# CK# 4131	LONNY Pulkcrabek 4698 Fox Lane N.E Iowa City, IA 52240		100.-	<input checked="" type="checkbox"/>
7.9	ID# CK# 5586	Melanie Friedman 1 Kivollwood Lane Iowa City, IA 52245		200.-	<input checked="" type="checkbox"/>
7.9	ID# CK# 6358	David Osterberg 318 2nd Ave N MT. VERNON, IA 52314		200.-	<input checked="" type="checkbox"/>
7.9.10	ID# CK# 14267	Stephen Jackson 144 Guildford SE Cedar Rapids, IA 52403		400.-	<input checked="" type="checkbox"/>
7.9	ID# CK# 2553	John Riccob 425 2nd St. #1140 Cedar, Rapids, IA 52401		400.-	<input checked="" type="checkbox"/>
7.9	ID# CK# 17041	Paul McAndrew 2771 Oakdale Blvd #6 Cedarville, IA 52241		400.-	<input checked="" type="checkbox"/>
SUB-TOTAL				\$ 2500.-	
TOTAL (If last page of this schedule)				\$	

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Page 3 of
(for Schedule A)

For Instructions, See Back of Form

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

COMMITTEE NAME (Must be same as on Statement of Organization)

Citizens for Williams

SCHEDULE

A

(Rev. 07/03)

MONETARY
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7.11.10	ID# CK# 3441	Michael CARberry 2029 Friendship St. Lower City, IA 52245		\$ 25.-	<input checked="" type="checkbox"/>
7.11.10	ID# CK# 5005	David O'Brien 4726 Leprechaun Ln Cedar Rapids, IA 52411		200.-	<input checked="" type="checkbox"/>
7.11.10	ID# CK# 3225	Cynthia Strong 609 7th Ave N MT. VERNON, IA 52244		200.-	<input checked="" type="checkbox"/>
7.11	ID# CK# 1150	Joseph Ironside 222 Prospect Pl Cedar Rapids, IA 52404		100.-	<input checked="" type="checkbox"/>
7.11	ID# CK# 5974	Mae Richardson 417 A Ave S MT VERNON, IA 52214		50.-	<input checked="" type="checkbox"/>
7.11	ID# CK# 2083	Amy Reasler 826 2nd Ave SE Cedar Rapids, IA 52409		200.-	<input checked="" type="checkbox"/>
7.11.10	ID# CK# 2078	Pressley Hemmingsen 425 2nd St #1170 Cedar Rapids, IA 52401		400.-	<input checked="" type="checkbox"/>
7.11.10	ID# CK# 9227	Sarah Smith 2044 Hwy 6 Oxford, IA 52322		200.-	<input checked="" type="checkbox"/>
7.11	ID# CK# 3306	David Leshtz 1411 Sheafield Lower City, IA 52244		75.-	<input checked="" type="checkbox"/>
7.11	ID# CK# 7374	Kaye Hale 1265 Parkview Ln. Eliz, IA 52227		25.-	<input checked="" type="checkbox"/>
SUB-TOTAL				\$ 1,475.-	
TOTAL (if last page of this schedule)				\$	

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Page 4 of
(for Schedule A)

For Instructions, See Back of Form

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

COMMITTEE NAME (Must be same as on Statement of Organization)

Bridge Bank Mt Vernon

SCHEDULE

A

(Rev. 07/03)

MONETARY
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7.11.10	ID# CK# 2849	Cathy Gullickson 258 Abbotsford DR Cedar Rapids, IA 52403		\$ 100.-	<input checked="" type="checkbox"/>
7.11.10	ID# 9672 CK# 1379	Plumbers + Pipefitters #188 1839 16th AVE SW Cedar Rapids, IA 52404		\$ 500.-	<input type="checkbox"/>
7.13	ID# CK# ACT Blue	Daniel Craig 23 Hammond ST #3 Cambridge, MA 02138		\$ 100.-	<input type="checkbox"/>
7.13	ID# CK# 3145	Gertrude M. Queen 454 Lexington Ave Iowa City, IA 52246		\$ 50.-	<input checked="" type="checkbox"/>
7.13.10	ID# CK# 5491	Kathleen Good 2102 LINMAR DR Cedar Rapids, IA 52402		\$ 100.-	<input checked="" type="checkbox"/>
7.13.10	ID# CK# 2401	Becky Dawes 68 24th AVE SW Cedar Rapids, IA 52404		\$ 50.-	<input checked="" type="checkbox"/>
7.13.10	ID# CK# 14102	Kevin Collins 385 Squaw Ridge Rd MARION, IA 52302		\$ 50.-	<input checked="" type="checkbox"/>
7.14	ID# 6067 CK# 5069	IA Health PAC 1775 90th ST West Des Moines, IA 50266		\$ 200.-	<input checked="" type="checkbox"/>
7.14	ID# CK# 2267	Peggy Chensvold 4125 Summerfield LN #A Cedar Rapids, IA 52408		\$ 100.-	<input checked="" type="checkbox"/>
7.14	ID# CK# 3334	Richard Albare PO Box 436 HAMPTON, IA 50441		\$ 250.-	<input checked="" type="checkbox"/>
SUB-TOTAL				\$ 1,500.-	
TOTAL (If last page of this schedule)				\$	

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Page 5 of _____
(for Schedule A)

For Instructions, See Back of Form

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

SCHEDULE A (Rev. 07/03)	MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

Citizens for Williams

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7.14.10	ID# CK# CASH	Betty Mohn 217 Hwy 30 W MT. VERNON, IA 52314		\$ 5.00	<input checked="" type="checkbox"/>
7.14	ID# CK# 4249	Joseph Kirby 3531 Timberline DR CEDAR RAPIDS, IA 52402		100.-	<input checked="" type="checkbox"/>
7.14	ID# CK# 5313	CATHERINE QUEHL-ENGEL 103 OAK RIDGE DR MT. VERNON, IA 52314		200.-	<input checked="" type="checkbox"/>
7.14	ID# CK# 6464	DARREN GAGE 108 CRESTVIEW DR MT. VERNON, IA 52314		100.-	<input checked="" type="checkbox"/>
7.14.10	ID# CK# 2725	Trude Elliott 209 6th ST NW MT. VERNON, IA 52314		200.-	<input checked="" type="checkbox"/>
7.14	ID# CK# 13377	Heather Shank 728 GRANT ST BOEVA CITY, IA 52240		25.-	<input checked="" type="checkbox"/>
7.14.10	ID# CK# 7674	PATRICK RAEER 938 KOEHL AVE BOEVA CITY, IA 52240		400.-	<input checked="" type="checkbox"/>
7.14	ID# CK# 4120	Jeffrey Cox 112 S. Dodge BOEVA CITY, IA 52240		100.-	<input checked="" type="checkbox"/>
7.14	ID# CK# 6529	Steve Severn 2001 Cardinal LN N. Liberty, IA 52317		200.-	<input checked="" type="checkbox"/>
7.14.10	ID# CK# 7128	JACK EVANS 2336 LINDEN DR CEDAR RAPIDS, IA 52402		200.-	<input checked="" type="checkbox"/>
SUB-TOTAL				\$1,530.-	
TOTAL (if last page of this schedule)				\$	

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Page 6 of
(for Schedule A)

For Instructions, See Back of Form

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

COMMITTEE NAME (Must be same as on Statement of Organization)*Citizens for our children***SCHEDULE****A**

(Rev. 07/03)

**MONETARY
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7.14.10	ID# 6492 CK# 1048	SEIL Local 199 2000 JAMES ST #111 Coralville, IA 52241		\$ 1,000.-	<input type="checkbox"/>
7.14	ID# CK# 6273	Linda LANGSTON 4257 SUNLAND CT Cedar Rapids, IA 52403		200.-	<input checked="" type="checkbox"/>
7.14	ID# CK# 1015	Matthew GIBSON 720 Rosebud CT Coralville, IA 52241		400.-	<input checked="" type="checkbox"/>
7.14.10	ID# CK# 1997	Margaret Ellison 409 3rd ST NW MT VERNON, IA 52314		25.-	<input checked="" type="checkbox"/>
7.14	ID# CK# 8310	Richard Skotowski PO Box 262 MT VERNON, IA 52314		100.-	<input checked="" type="checkbox"/>
7.14.10	ID# CK# 4050	Sidney Lutz 1142 JAMES Ave Sueisha, IA 52338		25.-	<input checked="" type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>

SUB-TOTAL

\$1,750.-

TOTAL (If last page of this schedule)

\$13,955.-

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Page 7 of 7
(for Schedule A)

FOR INSTRUCTIONS, SEE BACK OF FORM

EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE B (Rev. 07/03)	MONETARY EXPENDITURES
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

Citizens for Williams

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
6-23-10	ON LINE	ACT Blue PO Box 382110 Cambridge, MA 02238	TRANSMITTAL Rpt.	\$ 11.86
6-23-10	ON LINE	ACT Blue PO Box 382110 Cambridge, MA 02238	TRANSMITTAL Rpt.	1.98
6-22-10	ON LINE	ACT Blue PO Box 382110 Cambridge, MA 02238	TRANSMITTAL RPT	3.95
6-12-10	1185	Lisbon P.O. 123 MAIN ST. Lisbon, IA 52253	Stamps	100.-
6-15-10	1186	USPO 123 MAIN ST Lisbon, IA 52253	Stamps	88.-
6-15-10	1187	Gwen's 119 W. MAIN Lisbon, IA 52253	Food/Drink for volunteers	51.-
6-15-10	1188	Lisbon P.O. Lisbon, IA 52253 123 MAIN ST	Stamps	25.-
7-3-10	1189	Lisbon PO 123 MAIN ST Lisbon, IA 52253	Stamps	88.-
SUB-TOTAL				\$369.79
TOTAL (if last page of this schedule)				\$

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and Iowa Code 68A.402(3)(f).)

Page 1 of 3

(for Schedule B)

FOR INSTRUCTIONS, SEE BACK OF FORM

EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE B (Rev. 07/03)	MONETARY EXPENDITURES
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

Citizens for Williams

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (If applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
7.03.10	ID# CK# 1190	Dollar General 319 E Hwy 30 Lisbon, IA 52253	PARADE CANDY	\$58.32
7.3.10	ID# CK# 1191	Joensys 101 W. MAIN ST. Solon, IA 52339	Food for WORKERS	42.32
7.3.10	ID# CK# 1192	Jan's Ice Cream 231 W MARENGO RD Tiffin, IA 52340	Food for WORKERS	20.49
7.5.10	ID# CK# 1193	Fed Ex Office 4640 1st Ave NE Cedar Rapids, IA 52402	PRINTING	32.91
7.7.10	ID# CK# 1194	IA. Dem. Party 6100 Thornton Ave Des Moines, IA	Donation	3,000.-
7.9.10	ID# CK# 1195	Walgreens 1225 7th Ave MARION, IA 50321	PARADE CANDY	36.47
7.9.10	ID# CK# 1196	Sheryl Becker 4059 Crestview Cedar Rapids, IA 52402	clerical	285.-
7.10.10	ID# CK# 1197	Dollar General 319 E Hwy 30 Lisbon, IA 52253	PARADE CANDY	27.29
SUB-TOTAL				\$3502.80
TOTAL (if last page of this schedule)				\$3,872.59

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detailed on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G Instructions and Iowa Code 68A.402(3)(j).)

Page 2 of 2

(for Schedule B)

FOR INSTRUCTIONS, SEE BACK OF FORM

EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE B (Rev. 07/03)	MONETARY EXPENDITURES
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

Citizens For Williams

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
7/10	ID# CK# 1198	Maggie Williams (wife)	Reimbursement for food for workers	\$ 41.44
7/19/10	ID# CK# ON LINE	ACT Blue PO Box 382110 Cambridge, MA 02238	transmittal Rpt.	3.95
	ID# CK#			
	ID# CK#			
	ID# CK#			
	ID# CK#			
	ID# CK#			
	ID# CK#			
	ID# CK#			
SUB-TOTAL				\$ 45.39
TOTAL (If last page of this schedule)				\$ 45.39

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and Iowa Code 68A.402(3)(I).)

Page 3 of 3

(for Schedule B)

FOR INSTRUCTIONS, SEE BACK OF FORM

COMMITTEE NAME (Must be same as on Statement of Organization)

Citizens for Wilkes

SCHEDULE
E
(Rev. 06/97)IN-KIND
CONTRIBUTIONS☐ CHECK THIS BOX IF
AMENDING FORM

DATE RECEIVED (MM/DD/YY)	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE (if applicable)	DESCRIPTION OF IN KIND CONTRIBUTION	ESTIMATED FAIR MARKET VALUE	✓ IF FOR FUND-RAISER CONTRIBUTION
12/27/10	THOMAS Fund 5661 FLEMING DA. DES MOINES, IA 50321		POSTAGE + INVITATIONS	\$ 50. -	<input checked="" type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
SUB-TOTAL				\$	
TOTAL (If last page of this schedule)				\$	50. -

*Disclosure law requires candidates to disclose the relationship of any relative making an in-kind contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). (See Page 2 of forms packet.) If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page 1 of 1
(for Schedule E)

FOR INSTRUCTIONS, SEE BACK OF FORM

COMMITTEE NAME (Must be same as on Statement of Organization)

Citizens for Williams

SCHEDULE

F

(Rev. 02/08)

LOANS
RECEIVED
& REPAY☐ CHECK THIS BOX IF
AMENDING FORM

NOTE: This schedule reports money loaned to the committee which is deposited in the committee account.

TOTAL UNPAID LOANS FROM LAST REPORTING PERIOD \$ 700. -**PART I - MONETARY LOANS RECEIVED THIS REPORTING PERIOD**

(Original source of loan, such as a bank, must be shown if a third party is involved. Include loans from candidate's personal funds.)

DATE RECEIVED (MM/DD/YR)	NAME AND ADDRESS OF LENDER (Include Endorser's Name, If Applicable)	RELATIONSHIP TO CANDIDATE (If Applicable)	AMOUNT OF LOAN
			\$

TOTAL (PART I)

\$ 0**PART II - MONETARY LOAN REPAYMENTS MADE THIS REPORTING PERIOD**

(Loans forgiven must be reported on Schedule E - In-kind Contributions.)

DATE PAID (MM/DD/YR)	NAME AND ADDRESS OF LENDER (Include Endorser's Name, If Applicable)	RELATIONSHIP TO CANDIDATE* (If Applicable)	AMOUNT REPAY
			\$

TOTAL CASH REPAYMENTS (PART II)

\$ 0

From Schedule E -- TOTAL LOANS FORGIVEN

\$

TOTAL OUTSTANDING LOANS END OF REPORT PERIOD

\$ 700. -

*Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column when it applies.

Page 1 of 1
(for Schedule F)